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AD //	P O BOX 2567 GRAND RAPIDS, MI 49501							
UZ/U	2/2005 JBALINA2 0000	JUU64 10080295			Deborah A	. Witvoet	(Depositor's name)	
	FC:2501 700.00 OP				Nehorah	a. Widow	(Signature)	
	C:1504 C:8001	300.00 OP 15.00 OP			January 2	7. 2005	(Date)	
٢	APPLICATION NO.	FILING DATE	FIRST NAMED INV		INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
	10/080,295 02/21/2002			David A. Dalman MIC35 P-326 8834				
T	TITLE OF INVENTION: PROCESSES FOR FABRICATING PRINTED WIRING BOARDS USING DENDRITIC POLYMER COPPER NANOCOMPOSITE COATIL						COMPOSITE COATINGS	
Ĺ	APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
_	nonprovisional	YES	\$700 		\$300	\$1000°	02/10/2005	
	EXAMINER		ART UNIT		CLASS-SUBCLASS	]		
•	MUTSCHLE	1753		205-125000	· · · · · · · · · · · · · · · · · · ·	,		
	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the names of a single firm (having as a number of compart, DeWitt &				
•	"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
	(A) NAME OF ASSIGN	A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
	Michigan Molecular Institute Midland, Michigan							
P	Please check the appropriate assignee category or categories (will not be printed on the patent):							
4	a. The following fee(s) are enclosed:  4b. Payment of Fee(s):				` '		<del></del>	
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-	<del></del>				The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 16-2463 (enclose an extra copy of this form).			
5	5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.			☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).				
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	Authorized Signature Munch & En			Date <u>J</u>	nuary 27, 20	0.5		
Typed or printed name Gunther J. Evanina Registration No. 35 502								

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